

Individual Cognitive Dissonance in Society on Condom (A Sociology of Health Study in Makassar City)

Adam Badwi¹, Andi Agustang², Arlin Adam³

Department of Sociology, Universitas Negeri Makassar Kampus UNM Gunung Sari Baru, Jln. Bonto Langkasa, South Sulawesi Indonesia
Corresponding Author: Adam Badwi1

Abstract : This study aims to analyze the factors that affect the occurrence of own cognitive dissonance in the community against condoms in the city of Makassar through a quantitative approach Analytic design. The study sites were located in Makassar City with the reason Makassar has the largest HIV and AIDS cases in South Sulawesi province, the level of condom use was still very low, the epidemic rate of HIV and AIDS was very high 3 years, especially on the pattern of HIV and AIDS transmission through sex heterosexual. The results of this study indicate that religious norms, cultural values and experience of condom use have an influence on the occurrence of cognitive dissonance of individuals on the community on condoms and experience of condom use is the most dominant factor affecting the cognitive dissonance of individuals in the community against condoms.

Keywords - Cognitive dissonance, religious norms, cultural values, condom use experience

Date of Submission: 14-08-2018

Date of acceptance: 31-08-2018

I. INTRODUCTION

The existence of condoms in the middle of society is in an unsanctioned institution (Gillin and Gillin in Soekanto, 1990), a social institution that the community rejects, even if its existence cannot be avoided. It has an impact on the duality of knowledge, attitudes, perceptions, and actions of the people on condoms that can be seen clearly in the social interactions of the city. The duality of experience, beliefs, perceptions, and activities is an indication of own cognitive dissonance in society against condoms.

The symptom of the duality of knowledge about condoms can be seen in social interaction in a society whose form is the occurrence of individual denial of the effectiveness of condoms has even become a separate debate and lead to the annual ritual debate. Hawari (2012) can demonstrate this in his book: *Global Effect HIV / AIDS Psycho-fitness Dimensions* those condoms are not effective in preventing HIV and AIDS because the pore diameter of the condom is much larger than the HIV.

The denial is a scientific twist to the scientific truths of laboratory tests of condom effectiveness as proposed by people who believe in the efficacy of condoms characterized by the high confidence that condoms belong to health products under the Ministry of Health. The believer also believes that as a health product, condoms are a useful health tool in HIV and AIDS prevention and control. Besides, people who think in the effectiveness of condoms assume that denial of condom effectiveness by some communities has violated one of the critical points of the national AIDS response strategy stating that everyone is entitled to the right information to protect themselves and others against HIV infection and AIDS. The effectiveness of this condom reinforced by the results of the National Family Planning Association (PKBI) study in 2015, which states that the quality of condoms in circulation today is a condom that is strong enough and has been tested laboratory feasibility standards to hold sperm and HIV. In line with this, the effectiveness of condoms in preventing HIV and AIDS has been demonstrated by the results of a study by Isabelle de Vincenzi in 1994 published in the *New England Journal of Medicine* on 11 August 1994 which reported two years of research on 245 discordant couples (from every couple then one is HIV +). As a result, in 124 pairs who consistently used condoms in every sex, there was no HIV transmission. In 121 other couples who did not always, use condoms found HIV transmission in 12 people.

Individual cognitive dissonance in society occurs because the discrepancy between people's attitudes and behavior towards condoms occurs. It because of understanding of the knowledge possessed by the community and a pattern of thinking that places rationality on previous experience in which condoms and their use are one of the medical devices used in preventing pregnancy. In the family planning program is not a tool to prevent HIV and AIDS, which is still considered a disease that only exists in a society that does not maintain the principles of values, morals, and religion so that it is not appropriate to be widely disseminated to the public. The condition of the individual's cognitive dissonance in the community that occurs if it is not resolved will

trigger behavior that will be detrimental to society and health, especially in the increasingly uncontrolled transmission of HIV and AIDS.

Efforts to prevent and control HIV and AIDS in Makassar City through increased use of condoms in groups at risk of experiencing various obstacles. It happens because of the cognitive dissonance of individuals in society that have an impact on the increasing number of HIV and AIDS cases. It reflected in the HIV and AIDS data of the South Sulawesi Provincial Health Office 2015, which shows that the number of new cases of HIV and AIDS cases in the last three years has increased. In 2013 1,148 new cases increased by 1,285 new cases in 2014 and as many as 1,322 new cases by 2015. Meanwhile, in the average data of the incidence rate of the disease (attack rate) increased from the year 2013 compared to 2014 as much as 17.3% and experienced the average decrease in the incidence of infections (attack rate) from 2014 compared to the year 2015 of 15.3%. In other data, the data of behavior change survey in Indonesia conducted by the Ministry of Health of the Republic of Indonesia in 2014 found as many as 55% of all new HIV and AIDS infections in Indonesia caused by heterosexual sex (Ministry of Health RI, 2014). Based on condom use survey in Makassar City conducted by Mitra Husada Foundation (YMH) in 2015, condom use rate of risky sex is still meager, that is 50% -60%. Meanwhile, it believed that the number of condom use reaches, 100% very give a significant influence in holding the epidemic rate of HIV and AIDS in Makassar City.

Based on preliminary research results that have been done before, the cognitive dissonance of individuals in society against condoms characterized by the occurrence of the duality of knowledge, the duality of attitude, the duality of perception, hypocritical action and self-efficacy caused by several factors including religious norms, cultural values, and experience of condom use. So it needs an in-depth analysis of the influence of religious norms factors, cultural values, and expertise of condom use and the factors that predominantly affect the cognitive dissonance of individuals in the community against condoms.

II. RESEARCH METHOD

This research was conducted with a quantitative analytic design approach to analyze the factors that influence the occurrence of own cognitive dissonance in the community towards condoms in Makassar City. Population in this research was a society in Makassar City. Sampling method in this research was by using gradual sampling technique (Multistage Sampling). Sampling using more than one probability sampling technique. For the first stage using the stratified sampling method than simple random sampling method in the second stage and so on until it reaches the desired sample. Stratified random sampling, which was a technique used when a population has a member/element that was not homogeneous and proportionally distributed, for example in the number of families (KK) in Makassar City. The amount of sample determination was to take a sample by entering the number of families from the entire population in Makassar City then selecting several households per district to be sampled in the study.

The sample size was calculated by the Slovin formula (Sevilla, 1993):

$$n = \frac{N}{1 + N(e)^2}$$

Information:

n = sample size

N = population of families (KK)

e = degree of desired accuracy = 0.05.

Based on the above formula, then from 358,054 families in Makassar (BPS of Makassar City of 2017) obtained the number of samples as follows:

$$n = \frac{(358.054)}{1 + 358.054 (0.05)^2}$$
$$n = \frac{358.054}{896} = 400 \text{ sample}$$

n = 400 sample

The proportional stratified random sampling formula calculates the number of each class.

$$n_i = \frac{N_i}{N} n$$

Information:

n_i = large sample of families per district

N_i = large families population per district

n = sample size

N = large population

Data analysis used in this statistical study analysis with logistic regression test by using a computer program.

III. RESULT AND DISCUSSION

1. Religious norms for individual cognitive dissonance of condoms.

In the view of sociology, religion is one aspect of social life and part of the social system of society in addition to other elements. Religion is a life view that must be applied in the lives of individuals or groups. Both have interrelated and interdependent relationships with all the factors that contribute to shaping social structures in any society. It seen from the category of human understanding, religion has two distinct aspects in its manifestation, namely as follows: First, the psychological element, a subjective condition or condition in the human psyche, is concerned with what is perceived by believers. This condition is commonly called the situation of religion, the state of obedience and obedience to the worshiped. Second, the objective aspect, the outer side of the so-called real event, the experiential dimension of religion. This situation arises when belief is expressed by its adherents in various expressions, whether religious expression, ritual or fellowship (Kahmad, 2002: 14-15).

The concept of religion according to sociology is an empirical definition. Sociology never gives an evaluative religious description (judgment), sociology is only capable of providing a detailed description (describing what it is), which reveals what the followers understand and understand (Boty, 2015: 42). The issue of religion cannot separate from the life of the people, because religion itself is necessary for the presence of society.

Ishomuddin (2002: 54) describes, in practice the religious functions in society include:

a. Educative Functions

Religious believers argue that their religious teachings provide the teachings that must be adhered. Juridical jurisprudence serves to instruct and forbid. Both elements have the background to direct the guidance for the adherents to be right and accustomed to the good according to the teachings of their respective religions.

b. Rescue Function

Wherever a man is he always wants himself safe. The security taught by faith is wide-ranging security. The protection provided by faith to its followers is the salvation of the two worlds and the hereafter. In achieving salvation, the doctrine teaches its followers through the introduction of a sacred problem of faith to God.

c. Function as Atonement

Through the belief of a guilty person/sin can achieve inner peace through the guidance of religion. The sense of guilt and guilt will soon be lost from the inner one if a transgressor has redeemed his sin through repentance, cleansing or redemption.

d. Functions as Social Control

The teachings of religion by its adherents are regarded as the norm, so that in this case religion can function as individual or group social supervision because: first, religion as an institution, is the norm for its followers, secondly, religion dogmatically (teachings) has a critical function that is prophetic (revelation, prophethood).

e. Purpose of Solidarity Sense Fertilizer

The same religious followers of the same religious psyche will feel in common and one on one; faith and trust. This sense of unity will foster a sense of solidarity within groups and individuals, sometimes even able to foster a strong sense of unity.

f. Transformative Functions

The teachings of religion can change the personal life of a person/group into a new life following the religious instructions he embraces. The new life that he receives based on the spiritual teachings he espouses is sometimes able to change his loyalty to the customs or norms of life he embraced earlier.

g. Creative Function

Religious education encourages and invites believers to work productively not only for the sake of themselves but the benefit of others. Religious believers are not only required to operate routinely in the same pattern of life but are also necessary to innovate and discover new ones.

h. Sublimative Functions

Religious teachings consecrate all human effort, not just religion, but also the practical nature. For any human attempt as long as does not conflict with religious norms when done on a sincere intention, because for God is worship.

Individuals who express rejection of condoms are influenced by one factor that is the factor of religion. The use of condoms is contrary to the belief that the individual believes. Some literature on the use of condoms in the view of Islam that shows the separation of opinions is a conservative view that states that the use of condoms with the law is haram and a cheap look that states that the use of condoms with the law maqruh.

The two views each have their reasons for the existence of the hadith narrated by Muslim (1442), which reads: "that the Prophet Muhammad was asked about 'azl then he said," That (' azl) is a secret burial. "The 'azl or in medical is called Coitus Interuptus which is a love in which ejaculation is done outside, a kind of natural contraceptive method. According to the hadith, the burial alive is murder, and the law of murder is unlawful. The use of condoms allows' azl not occur, but keeps the cells in the sperm off, both different, but because the effect is the same, so equated. (Tribun-Medan.com, accessed on April 10, 2017).

The point of view of condom use that is contradicted by some individuals who forbid the use of condoms and some other individuals allows primarily on a foothold of knowledge sourced from scholars who are believed to be scholars by individuals to make the existence and use of condoms a problem that will continue to be contradicted without finding agreement of opinion as a way out . The presence and use of condoms will continue to be discussed in the process of interaction between individuals, between groups and between communities with clashes that suffered a deadlock without a way out as a certainty. It makes the existence and use of condoms to be discussed in quiet social practice, not resonate and will not be festive.

While on the different side, some individuals have the view that condom use is not contrary to the religion that the individual believes. The existence of condoms is seen as a health tool that is placed parallel to other health equipment used for health purposes. Some individuals in the process of interaction with other individuals in their social community have the view that the presence of condoms need not be related to religious aspects because of the position of condoms as a health tool used as a means for population control and prevention of HIV and AIDS. Individuals of this view are in reality mostly engaged in health care groups in general and specifically in the field of HIV and AIDS prevention.

In the dimension of the practice of condom use with a contraceptive perspective also experience dissonant views for some individuals. The purpose of condoms is believed to be an attempt to inhibit population growth for the community but the practice of using contraception in community life in one part is well received, but in others, it is considered inconsistent with the conservative religious norms believed.

So that the presence and use of condoms in the midst of society always raises views that lead to cognitive dissonance, where the existence and application of condoms can be accepted and at the same time rejected. It stems from the occurrence of own cognitive dissonance in personal practice, continuing in own cognitive dissonance in group practice and ending in particular cognitive dissonance in societal practice.

The practice of individuals who experience cognitive dissonance, based on the results of research conducted then religious norms with conservative views predominantly influence the level of the tendency of individuals who experience cognitive dissonance. However, in general it can be concluded that most individuals understand moderate religious standards so that the existence and use of condoms in the influence of religious norms will experience a shift in acceptance so that the efforts made in the framework of the presence of condoms as a health tool can reduce the occurrence of individual cognitive dissonance in various social practice in the middle of society.

It is in line with various literature showing the use of condoms allowed in Islam to take the basis of the opinion of some scholars claiming that the use of condoms with the law of Al Azl as expressed by Jabir radhiallahu anhu which states that we (the friends) did Azl in the time of the Prophet Shallallaahu 'alaihi wa sallam "(HR.Bukhari no 5207 / 5208-5209, Muslim no 1440). In another narration in Musnad Abi Ya'laa states that we performed Azl in the time of the Prophet sallallaahu 'alaihi wa sallam, and he did not forbid us from him (Shahih Muslim no 1440, Musnad Abi Ya'laa No. 2255) ([http: // www.muslimah.co.id/fiqih/2016/02/25](http://www.muslimah.co.id/fiqih/2016/02/25) accessed on April 10, 2017).

However, some views suggest that the use of condoms is a prohibited act having a footing based on the contemporary jurisdiction that in the days of Prophet Muhammad SAW had never been discussed about the condom but it was attributed to Azl that is producing sperm water outside as contained in the narrated hadith by Buhari in Fathul-Bariy 9/305 Assyamillah book by Ibn Hajar Al Asqanily who discussed that Al Azl is depriving (penis) after the penetration of agar (semen) spilled out far farji (<http://www.muslimah.co.id/fiqih / 2016/02/25> accessed on April 10, 2017). In line with that, Imam Nawawi said that Azl is a person who performs a torpedo (intercourse) which when his tears will be spilled then he expels (his cock) then sheds it outside her genitals (wives). (<http://www.muslimah.co.id/fiqih/2016/02/25> accessed on April 10, 2017).

2. The cultural value of individual cognitive dissonance of condoms

Culture is one factor that causes own cognitive dissonance of condoms. The artistic significance is a value that exists and develops in society. For Koentjoroningrat (1984: 8), cultural values are the first level of ideal or customary culture. The artistic significance is something that is considered very influential and used as a guide for a society in determining their attitudes, thoughts, and actions. Koentjoroningrat (1984: 8)

Besides, this cultural value has a system of cultural values consisting of conceptions that live in the minds of most societies about the things they should consider highly valuable in their lives. So that this aesthetic value system serves as the highest guideline for the behavior of individuals, families, groups, and society. Concretely this aesthetic value system is manifested in the form of special rules related to cultural and legal values.

Cultural values are values that are agreed upon and embedded in a society in the form of habits, beliefs, symbols that are used as a reference for behavior and responses to what will happen or are happening. Cognition that a person has in a culture may be different in the perception of other religions.

In general, the people of South Sulawesi Province consists of four major ethnic groups, namely Bugis, Makassar, Mandar and Toraja ethnic groups having their cultural values. In particular, in Makassar as the capital city of South Sulawesi province has also settled and spread the four major ethnic groups. Nevertheless, the people still put ethnic Makassar as ethnic indigenous in Makassar City.

Ethnic Makassar with the cultural value of Makassar, has a philosophy of life that must be upheld, including the culture of *siri na pacce* which some people still faithfully guard and by some others have experienced degradation due to the rapid progress of information, technology, and consumerism so that the inflow of foreign cultures cannot be stopped.

For people who hold fast to the philosophy of *siri na pacce*, it creates counterproductive in its application, especially for the prevention of the spread of HIV and AIDS. The community puts the philosophy of this series only in situations where governments, non-governmental organizations, and other health organizations are working to prevent HIV and AIDS such as counseling, socialization or HIV / AIDS prevention campaigns that inhibit such efforts. It is because the public views that the talk about condom use and risky sex is seen as a violation of the *siri's* territorial boundaries because the community still has a *siri* and does not want his territory to be violated by others. Meanwhile, social reality shows that the rate of the HIV and AIDS epidemic has continued to increase lately in South Sulawesi, especially in Makassar City.

Based on the results of the study showed that some individuals stated that if there were members of the community who contracted HIV and AIDS, it was seen as a disgrace in society. The strong cultural norms that are internalized within individuals in the Bugis and Makassar communities reinforce that punishments are waiting for individuals who conduct cultural propagation such as contracting HIV and AIDS, which is a disgrace. However, the implementation of cultural norms that are still concentrated on the impact caused while efforts in the form of processes do not get enough attention. In this process, there is a clash of cultural norms because at the level of the risky process of sex and the use of condoms do not want to be discussed openly while at this point some of the impacts that will occur can be minimized.

In the dimension of condom use as a tool of health in family planning for some individuals put that its application must be rejected because wearing condom means have violated the teachings of culture inherited by parents who have a principle in the family culture that many children a lot of fortune. It is reinforced by various research that suggests that one of the obstacles in the implementation of Family Planning in Indonesia is still the existence of cultural norms that are maintained as an ancestral heritage among many children a lot of sustenance and the view that each child born in the world has brought its livelihood.

Based on the findings of this study can be illustrated a pattern of existence and use of condoms dissonance where the condom positioning is simultaneously in self-perception that acceptance and rejection resulting from cultural norms that are still preserved and providing space for programs run by the government

It is in line with the statement of the head of the Central Board of the Indonesian Midwives Association (IBI) in 2014 (quoted in health.detik.com, accessed on April 10, 2017) that the culture of many children is a lot of sustenance is not yet released in most Indonesian society. The existence of this strong culture in Indonesian society is one of the most significant obstacles to the family planning program.

3. Experience of Condom use on the cognitive dissonance of individuals in the community against condoms.

Cognition that is inconsistent with the experience that has passed will lead to dissonance. Experience as an event that has been experienced in the period before now. Knowledge is one of the results obtained by humans from interaction with their environment.

This experience contains various things that can be known including knowing more about one understands of condoms. Experience is born of the process of sensing humans towards their environment. This experience then becomes a personal benchmark in doing activities or responding to everything in the future. A

person's experience is like a literature book that contains all kinds of information needed to be the basis for human beings in taking attitude and decisions in every segment of his life. Experience is an event that has been experienced in the period before this, which includes things that have been learned, known and never received in the past.

The experience of condom use for some individuals provides a significant contribution to the occurrence of own cognitive dissonance in society. It is seen in the building of personal views that experience increased levels of cognitive dissonance after the expertise never use condoms, but in its use, it gives contrary condemnation in the use of condoms in the form of inconvenience obtained in the way of not perceived pleasure in sexual intercourse. It raises a new decision in which the individual is not willing to return using condoms. Meanwhile, the expression of post-decision making experience using condoms is expected to be more expressive and enthusiastic, but in reality, there is instead the opposite.

In the results of this study can illustrate from experience gained in the use of condoms for some other individual states that sexual intercourse is felt by using a condom is quite tasty but will feel better when having sex without using barrier divider. The experience of condom use in a variety of individual practices is expected to serve as an intermediary medium for other individuals who still doubt the feelings obtained to trigger individuals who have not used condoms because of their hesitation to switch to the decision to use condoms. However, an inverted reality is derived, because of individual experiences that have used a condom but give negative prejudice; it will affect other individuals so that the views for condoms are running on the spot.

Some other individuals with condom use experience sharing the experience felt at the time of using condoms are associated with a very disheartening feeling in the use of condoms especially after sexual intercourse where sperm fluids are left in the condom to be cleaned, condoms should be rolled up, condoms should be folded and ultimately the condom should be thrown away at the spot again causing individual confusion.

Finally, summarizing the experience associated with the discomfort in condom use raises a rejection decision in the context of use for individuals despite being permissive when there is socialization of condom use in society. So in various socialization activities and counseling to the community associated with the use of condoms remain crowded visited by the public but in the matter of personal use remains a personal choice for each. It can be described that the excitement and the number of participants who attend the various activities of socialization of condom use is not a benchmark of the problem of the effectiveness of condom use in the effort of disease prevention and control efforts of the population.

IV. CONCLUSION

Based on the results of research conducted, it was concluded that religious norms, cultural values and the experience of condom use had an influence on the occurrence of own cognitive dissonance in the community towards condoms and the expertise of condom use was the most dominant factor influencing the existence of own cognitive dissonance in condoms.

REFERENCES

- [1]. BPS Kota Makassar. (2017). Makassar dalam Angka 2017. Makassar: Badan Pusat Statistik.
- [2]. Boty, Middy. (2015). Agama dan Perubahan Sosial. Jurnal Islam, no. 15.
- [3]. Dinas Kesehatan Provinsi Sulawesi Selatan. (2015). Situasi HIV dan AIDS di Provinsi Sulawesi Selatan. Makassar: Dinas Kesehatan Provinsi Sulawesi Selatan.
- [4]. Hawari, D. (2012). Global Effect HIV/AIDS Dimensi Psikoreligi. Jakarta: Badan Penerbit Fakultas Kedokteran Universitas Indonesia
- [5]. Ishomuddin. (2002). Pengantar Sosiologi Agama. Jakarta: Ghalia Indonesia.
- [6]. Kahmad, Dadang. (2002). Sosiologi Agama. Bandung: PT. Remaja Rosda Karya.
- [7]. Kementerian Kesehatan RI. (2014). Survey Perubahan Perilaku di Indonesia. Jakarta: Kementerian Kesehatan RI.
- [8]. Koentjaraningrat. (1984). Kebudayaan Jawa. Jakarta: Balai Pustaka.
- [9]. Perkumpulan Keluarga Berencana Indonesia. (2015). Data dan Informasi Perkumpulan Keluarga Berencana Indonesia (PKBI) Tahun 2015. Jakarta: Perkumpulan Keluarga Berencana Indonesia.
- [10]. Sevilla, C, et, al. (1993). Pengantar Metode Penelitian. Jakarta: Universitas Indonesia Press.
- [11]. Soekanto, S. (1990). Sosiologi Suatu Pengantar. Jakarta: Rajawali.
- [12]. Vincenzi, I.D. (1994). A Longitudinal Study Of Human Immunodeficiency Virus Transmission By Heterosexual Partners, *New England Journal of Medicine*, 331(6), pp. 341-346.
- [13]. Yayasan Mitra Husada. (2015). Survey Penggunaan Kondom di Kota Makassar Tahun 2014. YMH: Makassar.